

HCQCC WEBSITE REPORTING PLAN 10.27.08

The Massachusetts Hospital Association (MHA) is pleased to have the opportunity to submit testimony on the Health Care Quality and Cost Council's (HCQCC's) reporting plan specifying the quality and cost measures to be included on its consumer health information website and the security measures used to maintain confidentiality and preserve the integrity of the data. MHA continues to support transparency and the development of a consumer friendly website for obtaining information on provider quality and cost. Using the website, the Council has an opportunity to enhance its role as a respected resource, serve the public interest and also assist providers by helping them avoid duplicative measurement and reporting schemes that add unnecessary and counter-productive administrative complexity and cost to the system. In order to accomplish these goals, it is imperative that the Council remain committed to a common framework for quality and cost measurement and reporting.

MHA has already shared with the Council its "Expectations for Measuring, Reporting, and Improving the Quality and Safety of Hospitals and Health Care." Hospitals, physicians and other providers should report data one time, to one place, following one set of national specifications for measures that are widely accepted as valid and reliable indicators of the quality and safety of care. Although cost measures are not specifically mentioned, the principles inherent in this document apply to cost reporting as well. Included in these principles are the expectations that:

- The methods and data used in evaluations must be completely transparent.
- Accurate and complete data sources underlie the measurements.
- High scientific standards are used in measure selection.
- Statistical and clinical relevance is evident in measurement reporting.
- Methodological and data limitations are identified in public reports.
- Current coding standards must be used to insure that cost measures are accurate and valid (e.g. the Council's first dataset did not include the codes for digital mammograms, resulting in incorrect volume and cost data for facilities that perform that test).
- Data released by other organizations should be promptly and routinely updated on the HCQCC website.

Additionally, providers must be involved in the process early on. Hospitals can work with the Council to pilot new approaches and models and can provide valuable feedback by testing the data before it goes live so that costly mistakes and rework can be avoided. Providers must also be given the time to validate the data and to document any problems that are discovered. Most importantly, hospitals must be given the opportunity to preview the final data prior to making it public on a website.

As the Council looks to reduce costs and improve quality through transparency, it must also be mindful not to add cost or complexity to the system. The Council must be wary of any unintended consequences that could inadvertently increase costs or confuse consumers. And, while MHA agrees that a website is a good first step, continuous quality improvement and cost containment will

require a coordination of efforts by regulatory agencies, accrediting organizations, purchasers of care, and caregivers. MHA looks forward to being a key participant in these efforts.

Thank you again for the opportunity to provide testimony. If you have any questions, please contact Karen Granoff, Sr. Director of Managed Care at (781) 262-6035 or Michael Sroczynski, Sr. Director Government Advocacy at (781) 262-6055.